

United States District Court  
For the District of Delaware

Acknowledgement of Service Form  
For Service By Return Receipt

Civil Action No. 05-593 SLR

Attached below is a return receipt card reflecting proof of service upon the named party on the date shown.

<b>SENDER: COMPLETE THIS SECTION</b>		<b>COMPLETE THIS SECTION ON DELIVERY</b>	
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		<p>A. Received by (Please Print Clearly) <u>Larry V. S.</u> B. Date of Delivery <u>15-593-812</u></p> <p>C. Signature <u>Larry V. S.</u></p> <p>D. Is delivery address different from item A? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below: <u>LOREN MEYERS</u></p> <p>3. Service Type  <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.  4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p> <p>2. Article Number (Copy from service label) <u>7002 2030 0003 0326 5252</u></p>	
<p>PS Form 3811, July 1999      Domestic Return Receipt      102595-99-M-1789</p>			